

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA	4091	10/14
O.I.P.E. CLASSIFIER		49	11/19/99
FORMALITY REVIEW		71634	10/25/99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Best Available Copy

Claim	Final	Original	Date
1	✓	✓	9/1/02
2	✓	✓	9/1/02
3	✓	✓	9/1/02
4	✓	✓	9/1/02
5	✓	✓	9/1/02
6	✓	✓	9/1/02
7	✓	✓	9/1/02
8	✓	✓	9/1/02
9	✓	✓	9/1/02
10	✓	✓	9/1/02
11	✓	✓	9/1/02
12	✓	✓	9/1/02
13	✓	✓	9/1/02
14	✓	✓	9/1/02
15	✓	✓	9/1/02
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25	✓	✓	9/1/02
26	✓	✓	9/1/02
27	✓	✓	9/1/02
28	✓	✓	9/1/02
29	✓	✓	9/1/02
30	✓	✓	9/1/02
31	✓	✓	9/1/02
32	✓	✓	9/1/02
33	✓	✓	9/1/02
34	✓	✓	9/1/02
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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